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ABSTRACT

This paper addresses the key elements for designing school health centers, the emergence of school-based health clinics and the minimum requirements these facilities should have, and the basic principles to remember when designing school health centers. The paper's focus concerns the nurse's office and the school-based health clinic. Additionally highlighted are the types of school health centers and their importance. (GR)

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School Health Centers

National Clearinghouse for Educational Facilities

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School health centers are an important resource for the adequate care, support, and development of a student's overall health. While most health centers concentrate on diagnostic and preventative care, their influence is often far greater. As educational research shows, there is a strong relationship between a student's psychological and physical well being and his or her academic achievement (Igoe 1998: 15). School health centers are thus an integral component in a school's mission to foster academic achievement.

Types of School Health Centers

The first school nurse was employed in 1902 by the New York City public schools. Today there are multiple ways to provide health care through the school system. While the nurse's office is by far the most common means of offering healthcare, over 15 percent of all school districts now have school-based health clinics for students and their families *(Making the Grade)*. School-based health clinics are an integral component of "full service schools" and provide a wide range of physical and mental health services, often involving community agencies that contribute funding (Dryfoos 1996: 18).

School health centers often serve as the primary provider of adequate health care for school-aged youth in urban and rural areas. This has important ramifications on school achievement for many "at risk" students. Twenty-five percent of today's children live in poverty, substantially lowering their access to quality health care and placing them at a greater health risk. Decreased academic performance, truancy, and dropping out of school are all too often the consequences of a lack of timely and preventative health care (Carlson *et al* 1995: 185). A school health center can be the first, and sometimes only, place where youth receive health care.

There are two additional means of providing health care to schools: school-linked health centers and community-based health centers. School-linked health centers are usually located off site and have provider agencies that contract with the school system for health services. Community-based health centers are administered by community agencies and are used as sources of referral by school personnel.

Schools often use a combination of these methods in providing health care to students. Because of their presence within the school building, this digest will focus on the nurse's office and the school-based health clinic.

Key Elements of School Health Centers

While health centers may range from a cot and first-aid station to a comprehensive clinic offering physical, behavioral, and mental health services to students and their families, all health facilities should guarantee privacy, confidentiality, and a sense of well being.

Privacy. The facility's physical layout should address student's psychological and social need for privacy. The waiting area should not be visible from an external corridor, the examination room should be secluded from the rest of the health center by walls or movable partitions, and the phone should be in a private or semiprivate enclosure. In general, all private spaces and rooms should provide as much physical and acoustical seclusion as possible for consultations. It is, nevertheless, important for the school nurse to be able to supervise the key areas in the health center to ensure safety and security.

Confidentiality. The mental and physical health of an individual should be confidential. Therefore, equip the health center with locking filing cabinets and storage spaces for medical records and personalized pharmaceuticals; keep administrative files, information, and equipment out of patients' reach; and provide separate restrooms, waiting areas, and rest areas for high school girls and boys.

Sense of well being. Health care research supports the theory that a relaxing or soothing atmosphere promotes quicker recovery and healing. School health centers should be designed to enhance feelings of comfort,

EF 005 867

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safety, and calm. Soft colors promote quiet and concentration. Natural light from windows or skylights relieves strain and anxiety. Minimizing noise lowers blood pressure and lessens frustration (Rouk 1997: 37).

Nurse's Office

The major focus and goal of the nurse's office is the

- prevention of illness and disability, and
- early detection and correction of health problems.

The school nurse fulfills these goals through a combination of

- screening, diagnostic, and treatment services for minor, major, and acute problems,
- referrals to community agencies, and
- health education and promotion.

Typical daily activities of the school nurse may include administering immunizations and vision and hearing screenings; coordinating student referrals with community agencies; notifying parents about their children's health; providing first aid for minor and major physical injuries; dispensing student medication; and acting as an instructor or resource for health education (CSNO 1999; Passarelli 1994: 141–42). Consequently, the nurse's office needs:

- **a rest area with beds.** Beds for ill students should be curtained off, partitioned, or physically separated from the rest of the nurse's office.
- **a private office in which the nurse may confer or consult.** The private office should have an intercom to the administrative offices, and electrical and cable connections for a telephone, computer, and modem access to the Internet.
- **storage for medical records, first aid and ancillary supplies, and students' medicines.** The storage space should be lockable to ensure the security of all medical records. A refrigerator with locking compartments should be available to store medicine and first-aid materials.
- **an examination area for health testing and treatment.** The examination space should be at least 22 feet long to allow for vision screening. Bright light, such as from windows, should be avoided. To facilitate hearing tests, the examination area should be quiet and isolated from distracting noises. Each examination room should have a sink with hot and cold water, as well as a mirror and ice machine.
- **a restroom,** or an adjacent one.

Guidelines concerning elementary and middle school square footage for a nurse's office vary anywhere from 200 to 500 square feet. The Council of Educational Facility Planners (CEFPI 1991: 38) recommends the following square footage guidelines for a high school nurse's office:

Office (for nurse)	150–175
Examination room	275–300
Waiting area	100–150
Rest area	100–150
Restrooms	30–40

In general, the nurse's office should be located near the administrative office, meet the federal requirements for accessibility, and be able to accommodate educational displays that promote timely themes and events.

School-Based Health Clinic

School-based health clinics first appeared in the late 1960s and early 1970s. Today there are over 1,500 such centers throughout the country in areas with a high need for comprehensive and accessible health care services *(Making the Grade)*. School-based health clinics offer youths and their families a combination of physical and mental health care services, focusing primarily on:

- screening, diagnostic testing, treatment, and health counseling services,
- referrals and links with community providers, and
- health promotion and injury and disease prevention education.

This applies to physical and mental health, as well as to substance abuse services (either on site or through referral). Full-time staffing of school-based health clinics usually includes a nurse practitioner, mental health counselor, and health assistant. A physician, dentist, and mental health supervisor are usually on site at least once a week. Although capacity will vary according to local conditions, it is not unusual for a single school-based health clinic to handle over 3,000 visits per year.

To allow for the various functions that transpire in a school-based health clinic, the following minimum facilities should be available.

Infirmary. This area should provide cots and other furniture for individuals who are resting and recovering. Consider separating this space for male and female use.

Private office space. Private office space should be provided for each full-time provider. Each office should be wired for telephone, computer, and modem access to the Internet. An internal intercom with other health center offices and an external intercom to the school's administrative offices should be available.

Secure storage area(s). Secure storage areas should be provided for pharmaceuticals, sterile supplies, and medical records.

Private examination and treatment room(s). There should be a minimum of one examination room per full-time provider. Each room should have a sink with hot and cold water and storage space for first-aid and examination supplies. If the room is to be used for more specialized treatment, consideration should be given to an appropriate number of electrical outlets.

Utility area(s). The utility area should have a designated clean and soiled space for clinical functions and disposal of waste.

Laboratory. The laboratory area should have multiple electrical outlets, bright and directed light, and easy access to a refrigerator and ice maker. The laboratory area and the rest of the health clinic should be designed to follow infection control practices and universal precautions as defined by Occupational Safety and Health Administration (OSHA) regulations. This includes environmental sanitation; cleaning and sterilization of equipment and supplies; and collection, storage, and disposal of hazardous and medical waste.

Waiting area, reception/clerical area, and restroom(s) are also part of the clinic's minimum facilities.

Square footage requirements for school-based health clinics, while not standardized, have been found to be approximately 1,500 to 2,000 square feet per 700 students. Certain functions may require more than one space and some spaces may be shared by two or more health care providers. Maryland's Department of Education *(Making the Grade)* provides the following net square footage suggestions for major spaces.

Waiting area/reception	75–200
Office (each)	60–120
Resting area/infirmary	100–200
Examination room (each)	80–100
Restrooms	50–120
Laboratory	80–150
Record storage	50–75
Storage (general)	50–100
Conference room	120–200

School-based health clinics frequently operate year round with extended hours, often when the rest of the school is closed. This has important implications on a range of facility issues. Heating and ventilation systems should serve the health center independently from the rest of the school. Telephone and electrical wiring should be dedicated exclusively for health center use and should be independent from school telephones and wiring. The health center should be adjacent to public parking and should have a prominent entrance with outdoor lighting for night use. Finally, the health center should be easily closed off from the rest of the school without affecting external access to the health center or internal access to restrooms or administrative supplies.

Principles for Designing School Health Centers

When designing school health centers, remember that

- **school health centers should be inviting to students and the public.** There should be noticeable markings (in multiple languages if need be) for the health center. The entrance should be prominent and clearly visible. Access for individuals with disabilities should be provided.
- **medical emergency vehicles** should have easy access to the health center.
- **privacy should be fostered** acoustically and physically.
- **lighting** should be controlled by the occupant of the space.
- **surface areas** (such as floors, walls, windows, countertops, and window shades/blinds) should be easily cleanable without sacrificing aesthetic appeal.
- **furniture should be comfortable and provide a sense of safety.** This can be achieved with numerous oversized pillows, by staggering seating arrangements, or through the shape, texture, and color of the furniture itself.

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Additional Information

See the NCEF annotated bibliography *Health Centers*, online at *http://www.edfacilities.org/ir/hottopics.cfm.*

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